## 10/533353 MULTIPLE DEPENDENT CLAIM FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) **CLAIMS** AFTER AFTER AS FILED AFTER **AS FILED** AFTER 2 MAMENDMENT "I"AMENDMENT I"AMENDMENT 2 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 39. TOTAL IND

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CLAIMS

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CLAIMS

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